Case 17-35386-VFP Doc 36 Filed 03/06/19 Entered 03/06/19 15:33:11 Desc Main

			Paue I UI /					
Fill in this information to identify your case:								
Debtor 1	Steve E. Minieri							
	First Name	Middle Name	Last Name					
Debtor 2	Elaine D. Minieri							
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States E	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY						
Case number	17-35386							
(if known)								

Check if this is an amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pa	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	249,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,400.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	258,400.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	418,257.74
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	206,118.03
	Your total liabilities	\$	624,375.77
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,215.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,097.42
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other so	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	., family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	submit this form to

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Debtor 1 Steve E. Minieri Debtor 2 Elaine D. Minieri

Case number (if known) 17-35386

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,642.54

\$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	tal claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	105,817.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	105,817.00

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Fill in this information to	o identify your case:	
Debtor 1	Steve E. Minieri	
Debtor 2 (Spouse, if filing)	Elaine D. Minieri	
United States Bankrup	tcy Court for the: DISTRICT OF NEW JERSEY	
Case number (If known)	35386	Check if this is:
(i. i.i.dii.i)		<ul><li>An amended filing</li><li>A supplement showing postpetition chapter</li></ul>
Official Form	1061	13 income as of the following date:
Ciliciai i Oilli	1001	MM / DD/ YYYY

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Francisco estatura	■ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed
	employers.	Occupation		Retired
	Include part-time, seasonal, or self-employed work.	Employer's name	Rockaway Lanes, Inc.	
	Occupation may include student or homemaker, if it applies.	Employer's address	365 Route 46 Rockaway, NJ 07866	
		How long employed to	here? 5 months	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 416.13 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 416.13 \$ 0.00

Official Form 106I Schedule I: Your Income page 1

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	tor 1 tor 2	Steve E. Minieri Elaine D. Minieri	_		Case	e number ( <i>if kr</i>	nown)	17-3	35386		
	Cor	by line 4 here	4.		Fo:	r Debtor 1	5.13		r Debtor n-filing s		
	996	y line 4 here			Ψ_	710	,,,,,	Ψ_		0.00	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$_	105	5.86	\$_		0.00	_
	5b.	Mandatory contributions for retirement plans	5b	ο.	\$_	(	0.00	\$_		0.00	_
	5c.	Voluntary contributions for retirement plans	50		\$_		0.00	\$_		0.00	_
	5d.	Required repayments of retirement fund loans	50		\$_		0.00	\$_		0.00	_
	5e.	Insurance	56		\$_		0.00	\$_		0.00	_
	5f.	Domestic support obligations	5f		\$_		0.00	\$_		0.00	_
	5g.	Union dues Other deductions Charity	5g	-	\$_ \$		0.00	. \$_		0.00	_
_	5h.	Other deductions. Specify:	_	า.+	ф_		0.00	_		0.00	-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		<b>5</b> _		5.86	\$_		0.00	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	310	).27	\$_		0.00	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	<b>a</b> .	\$	(	0.00	\$		0.00	
	8b.	Interest and dividends	8t		\$		0.00	\$		0.00	_
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation	<b>t</b> 80 80		\$_ \$_	2,626	0.00 6.00	\$_ \$_		0.00	_
	8e.	Social Security	86	Э.	\$	-	0.00	\$		0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income	e 8f 8g		\$_ \$_		0.00	\$_ \$_	2,	0.00 ,279.06	_
	8h.	Other monthly income. Specify:	8h	า.+	\$	(	0.00	+ \$		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	2,626	6.00	\$_	2	2,279.0	6
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,936.27	+ \$	2,	,279.06	= \$ _	5,215.33
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	r dep			. •		-			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certalies							e. 12.	\$	5,215.33
13.	Do :	you expect an increase or decrease within the year after you file this form No.	1?							Combi month	ned y income
		Yes, Explain: Co-Debtor's pension loan ends 01/2019									

Fill	in this information to i	dentify yo	our case:					
Deb	otor 1 Steve	e E. Min	ieri			Che	ck if this is:	
							An amended filing	
Deb	tor 2 <b>Elai</b> n	e D. Mii	nieri					wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bankruptcy Co	ourt for the	: DISTRI	CT OF NEW JERSEY			MM / DD / YYYY	
	e number 17-3538	6						
(								
Of	fficial Form 1	106J						
So	chedule J: \	our	Exper	ises				12/15
info	ormation. If more spanion of the spa	ace is ne swer ever	eded, atta ry questio	If two married people ar ch another sheet to this n.				
Par 1.	t 1: Describe Your Is this a joint case		hold					
١.	☐ No. Go to line 2.	•						
	Yes. Does Debt	or 2 live i	in a senar	ate household?				
		0. 20	iii a copai.					
	■ No □ Yes. Deb	otor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2.	Do you have deper	ndents?	■ No					
	Do not list Debtor 1 Debtor 2.		☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the							□ No
	dependents names.							☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No
3.	Do your expenses	include	_	M				☐ Yes
Ů.	expenses of peopl	e other t	han $_{f \sqcap}$	No You				
	yourself and your	depende	nts? ⊔	Yes				
Par	t 2: Estimate Yo	ur Ongoi	ng Monthl	y Expenses				
exp				uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	ficial Form 106l.)	tarice ari	a nave me	nuded it on <i>conedule i. T</i>	our moome		Your exp	enses
4.	The rental or home payments and any r			ses for your residence. I	nclude first mortgag	e 4. :	\$	2,072.42
	If not included in li	ine 4:						
	4a. Real estate ta	axes				4a.	\$	0.00
	4b. Property, hon		s, or renter	's insurance		4b.	·	0.00
			•	ipkeep expenses		4c.		80.00
E				dominium dues	and a model of the con-	4d.	·	0.00
5.	Additional mortga	ge paymo	ents for yo	our residence, such as ho	me equity loans	5.	<b>—</b>	0.00

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	otor 1 Steve E. Minieri Elaine D. Minieri	Case number (if known)	17-35386
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a. \$	250.00
	6b. Water, sewer, garbage collection	6b. \$	75.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	350.00
	6d. Other. Specify:	6d. \$	0.00
7.	Food and housekeeping supplies	7. \$	500.00
8.	Childcare and children's education costs	8. \$	0.00
9.	Clothing, laundry, and dry cleaning	9. \$	75.00
10.	Personal care products and services	10. \$	75.00
11.	Medical and dental expenses	11. \$	150.00
12.	Transportation. Include gas, maintenance, bus or train fare.		050.00
	Do not include car payments.	12. \$	250.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
14.	Charitable contributions and religious donations	14. \$	25.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.	45- 6	477.00
	15a. Life insurance	15a. \$	177.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	350.00
	15d. Other insurance. Specify:	15d. \$	0.00
	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16. \$	0.00
17.	Installment or lease payments: 17a. Car payments for Vehicle 1	170 ¢	000.00
		17a. \$	269.00
	17b. Car payments for Vehicle 2	17b. \$	299.00
	17c. Other. Specify:	17c. \$	0.00
	17d. Other. Specify:	17d. \$	0.00
	Your payments of alimony, maintenance, and support that you did not repo deducted from your pay on line 5, Schedule I, Your Income (Official Form 10	<b>)6I).</b>	0.00
19.	. , , , , , , , , , , , , , , , , , , ,	\$	0.00
20	Specify:	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form or on		0.00
	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
21.	Other: Specify:	21+\$	0.00
22	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$	5,097.42
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	•	<u> </u>
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	5,097.42
23.	Calculate your monthly net income.		
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,215.33
	23b. Copy your monthly expenses from line 22c above.	23b\$	5,097.42
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	117.91
24.	Do you expect an increase or decrease in your expenses within the year aft For example, do you expect to finish paying for your car loan within the year or do you expect modification to the terms of your mortgage?  ■ No. □ Yes. Explain here: Daughter pays for Honda CRV.		crease or decrease because of a
	ss		

Fill in this information to identify your case:							
Debtor 1	Steve E. Minieri						
	First Name	Middle Name	Last Name				
Debtor 2	Elaine D. Minieri						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY					
Case number	17-35386						
(if known)							

Check if this is an amended filing

#### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is N	OT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have re that they are true and correct.  X /s/ Steve E. Minieri Steve E. Minieri Signature of Debtor 1	x /s/ Elaine D. Minieri Elaine D. Minieri Signature of Debtor 2
Date March 6, 2019	Date March 6, 2019